



\$ 2667/14u ✓

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)	Docket Number (Optional)
	4906P060

In re Application of Siegfried Luft	
Application Number 09/887,303	Filed 6/22/2001
For Protection Mechanism for an Optical Ring	
Group Art Unit 2667	Examiner Blanche Wong

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a Response to Office Action in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows
(check time period desired):

- ☒ One Month (37 CFR 1.17(a)(1)) \$120.00
- ☐ Two Months (37 CFR 1.17(a)(2)) \$
- ☐ Three Months (37 CFR 1.17(a)(3)) 08/25/2005 SHASSEN1 00000080-09887303
- ☐ Four Months (37 CFR 1.17(a)(4)) 01 FC:1251 \$ 120.00 OP
- ☐ Five Months (37 CFR 1.17(a)(5)) \$
- ☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is \$60.00.
- ☒ A check in the amount of the fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Director has already been authorized to charge fees in this application to a Deposit Account.
- ☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account Number 02-2666. I have enclosed a duplicate copy of the Fee Transmittal.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

☒ attorney or agent of record.

☐ attorney or agent acting under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a) 37,813.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2039.

August 22, 2005

Date

(408) 720-8300

Telephone Number

Daniel M. DeVos

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.